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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a 371 of PCT/DE03/01284 04/16/2003

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

GERMANY 102 28 692.2 06/27/2002

## \*\* SMALL ENTITY \*\*

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY SWITZERLAND	SHEETS DRAWING 1	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials			

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## TITLE

Surgical instrument

FILING FEE RECEIVED 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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